

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	7/19
O.I.P.E. CLASSIFIER			7-2-02
FORMALITY REVIEW	BS	66629	9-2-02
RESPONSE FORMALITY REVIEW			10-26

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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Best Available Copy

If more than 150 claims or 10 actions  
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